

MULTIPLE DEPENDENT CLAIM
FEE CALCULATION SHEET
(FOR USE WITH FORM PTO-876)

SERIAL NO.
101828650
FILING DATE

4/16/07 CLAIMS

AS FILED		AFTER 1st AMENDMENT		AFTER 2nd AMENOMENT	
IND.	DEP.	IND.	DEP.	IND.	DEP.
1		1			
2		1			
3		1			
4		1			
5		1			
6		1			
7		1			
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43		1			
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45		1			
46		1			
47		1			
48		1			
49		1			
50		1			
TOTAL IND.		1			
TOTAL DEP.		16			
TOTAL CLAIMS		17			

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TOTAL IND.				
TOTAL DEP.				
TOTAL CLAIMS				